, plication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								09/847447						
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	ENTITY		OTHER THAN OR SMALL ENTITY				
T	OTAL CLAIMS	6					RATE	FE	Έ	RATE	FEE			
F	OR .	NUMBER	R FILED	NUM	BER EXTRA	BASIC F	EE 370	.00 OR	BASIC FEE	740.00				
TO	OTAL CHARGE	ABLE CLAIMS	l - in	กบร 20=	*	*	X\$ 9:	=	OR	X\$18=				
INI	DEPENDENT C	- n	ninus 3 =	•	_	X42=		OR	X84=					
М	JLTIPLE DEPE	PRESENT				+140=								
ـــــــــــــــــــــــــــــــــــــ	the difference	e in column 1 is	less than z	rero enter	"0" in	column 2	TOTA		OR OR		 			
							TOTA	- <u>L</u>		OTHER	THAN			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMAL	L ENTIT	Y OR	SMALL					
DMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER OUSLY	PRESENT EXTRA	RATE	ADE TION FEI	IAL	RATE	ADDI- TIONAL FEE			
OME	Total	. 30	Minus		6	= /	X\$ 9=) OR	X\$18=	}			
AME	Independent	. 5	Minus	***	G	=	X42=		OR	X84=				
٧	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+140=	1	OR	+280=				
							TOTA		OR	TOTAL				
						(0.1	ADDIT. FE	E		ADDIT. FEE	L			
		(Column 1) CLAIMS		(Colun	EST	(Column 3)		ADD)I-		ADDI-			
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA	RATE	TION FEE	AL	RATE	TIONAL FEE			
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=				
	Independent	*	Minus	***		=	X42=		OR	X84=				
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+140=		OR	+280=				
							TOTA		OR	TOTAL				
					0.1	(0.1	ADDIT. FE	E		ADDIT. FEE	L			
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHI NUME PREVIO PAID I	EST BER OUSLY	(Column 3) PRESENT EXTRA	RATE	ADD TION	AL	RATE	ADDI- TIONAL FEE			
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=				
	Independent	*	Minus	***		=	X42=		OR	X84=				
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		-	1						
_	laka a ake-ta a - l	ma 1 la lace than t	na antor in col-	ıma 2 write	*O" in co	olumn 3.	+140=		OR	+280=	 			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								Ë L _	OR	ADDIT. FEE	<u></u>			

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000								09747447					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			30					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED NUMBER E			ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TC	TAL CHARGEA	BLE CLAIMS	30 - minus 20= * /O					X\$ 9=		OR	X\$18=	1800	,
IND	EPENDENT CL	AIMS	5 _ mir	nus 3 =	= 2			X40=		OR	X80=	1600	b
MU	ILTIPLE DEPEN	DENT CLAIM P	RESENT			3	+135=	:	OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL.		,	TOTAL	10000	0
	C	LAIMS AS A	MENDED	- PAR (Colu		(Column 3)		SMALL I	ENTITY	OR	OTHER SMALL I	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	:	
AME	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN.	T CLAIM		1	+135=		OR	+270=		ĺ
							ı	TOTAL			TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	_ '	ADDIT. FEE			ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	-	=	↓	X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		ا د	+135=		OR	+270=		
								TOTAL		OR	TOTAL ADDIT. FEE		ł
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE	<u> </u>		AUDIT, PEE		1
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	┧╽	X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	r CLAIM		┙╽	+135=		OR	+270=		1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										ł	TOTAL	 	1
											1		